

POSITION	INITIAL	ID NO.	DATE
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FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

## INDEX OF CLAIMS

✓  
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— Through number  
↑

Rejected      A  
Allowed      I  
Cancelled      C  
Restricted      O

Non-Excluded  
Interference  
Appeal  
Objected

Claim	Date
Final	Original
1	12-4-06
2	14-2-13
3	6-1-09
4	10-2-03
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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